



GENERAL SERVICES DEPARTMENT
OPERATING PROCEDURE

Number: 2.7

Date Issued*: 12/10/2007

Reviewed/Revised: 6/20/13

Page: 1 of 4

Subject: Safety Hazard Reporting

I. PURPOSE

Provide direction to General Services Department (GSD) employees for reporting of safety hazards within GSD.

II. DEFINITIONS

- A. **Safety Concern** – An employee's observation of a condition within the work place that has the potential to cause injury or damage.
- B. **Safety Hazard** – A condition in the workplace or with a work process that has the potential or will cause injury or damage.
- C. **Near Miss** – Any event that had the potential to cause injury or damage but was avoided by circumstance.
- D. **Safety Suggestion** – An employee's submitted idea or concept to modify or correct a Safety Hazard or Safety Concern.

III. RESPONSIBILITIES

- A. **GSD Safety Coordinator**
Review all Safety Suggestions/Near Miss Reports and provide recommendations for corrective action to the Divisions.
- B. **GSD Divisions**
 - 1. Investigate all safety concerns and hazards reported by Division employees, notify Safety Coordinator, and take corrective action.
 - 2. Respond back to the Division employees with the corrective action that was taken in response to the reported safety concern or hazard; inform Safety Coordinator.
- C. **Employees**
Actively participate in the GSD Safety Suggestion/Near Miss program by reporting all safety concerns and hazards immediately to their supervisor and/or the GSD Safety Coordinator.

IV. PROCEDURE

- A. **Reporting Safety Concerns or Safety Hazards**
 - 1. **ANY EMPLOYEE WHO BELIEVES IMMINENT DANGER OR A SERIOUS HAZARD EXISTS WILL STOP WORK IMMEDIATELY AND REPORT THE**



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Page: 2 of 4

Subject: Safety Hazard Reporting

HAZARD TO THEIR SUPERVISOR WHO, IN TURN, WILL ENSURE ALL WORK WILL NOT RESUME UNTIL THE HAZARD HAS BEEN ELIMINATED.

2. If an employee has a safety concern or observed a safety hazard, s/he shall report, verbally or in writing, the concern or hazard to their supervisor. The supervisor will investigate the concern or hazard within one working day of notification to provide direction for a solution.

B. Near Misses

A "near miss" shall be regarded as a warning that an accident of a particular type may occur in the future.

1. Division management shall encourage near miss reporting.
2. The GSD Safety Suggestion/Near Miss Report form is to be utilized to report near miss incidents.
3. Near miss reporting will not result in disciplinary action.
4. A completed Safety Suggestion/Near Miss Report will either be returned to the employee's Supervisor, the Department Safety Coordinator, or placed in the Safety Suggestion box located in the employee's division.

C. GSD Safety Suggestion Program

The Safety Suggestion Program is provided to enhance safety awareness and assist in identifying and correcting unsafe conditions in the workplace before an accident occurs.

1. A Safety Suggestion shall be documented on the GSD Safety Suggestion/Near Miss Report.
2. Completed Safety Suggestion/Near Miss Reports may be returned to the employee's Supervisor, the Department Safety Coordinator, or placed in the Safety Suggestion box located in the employee's division.
3. Safety Suggestion box locations
 - a) Architecture & Engineering Office's lounge area
 - b) Communications Maintenance's lounge area
 - c) Facilities Maintenance Carpentry Shop



GENERAL SERVICES DEPARTMENT
OPERATING PROCEDURE

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Page: 3 of 4

Subject: Safety Hazard Reporting

- d) Fleet Service's Main shop and Tire Shop located at the Price Service Center
- e) GSD Director's Office

The suggestions left in these boxes will be collected monthly by the GSD Safety Coordinator. The Safety Coordinator will document these suggestions and recommended follow-up action, if any, to address the concern. If the employee provided their contact information, the Safety Coordinator will communicate follow-up actions to the employee, the employee's supervisor, and the Division Administrator.

Attachments: GSD Safety Suggestion / Near Miss Report Form
<http://drupal.ci.tucson.az.us/files/central-safety/pdfs/hazardform/hazardform.pdf>

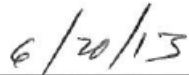
References: None.

Review Responsibility and Frequency: General Services Department Safety Coordinator shall review this procedure annually.

Authorized:



Department Director



Date



GENERAL SERVICES DEPARTMENT
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Page: 4 of 4

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CITY OF TUCSON

**EMPLOYEE'S REPORT OF HAZARD,
UNSAFE CONDITION, NEAR MISS, CONCERN OR
SUGGESTION**

	INFORMATION	CONDITION	X
Department:		Hazard	<input type="checkbox"/>
Division:		Unsafe Condition	<input type="checkbox"/>
Location:		Near Miss	<input type="checkbox"/>
Date:		Concern	<input type="checkbox"/>
		Suggestion	<input type="checkbox"/>

*EMPLOYEE NAME	ID #	DEPARTMENT	DIVISION

*Employees who submit a Report of Hazard, Unsafe Condition, Near Miss, Concern or Suggestion are not required to provide their name or ID number unless they wish to be notified of action taken by the Department to correct or address the report.

HAZARD/CONDITION DESCRIPTION		
Note: Hazards/Conditions that are <i>imminently dangerous to life and health</i> should be reported immediately to Supervision and to Central Safety Services @ 837-4308/4309		
Description:		
Supervisor Review of Hazard:		Date:
Safety Officer Review of Hazard:		Date:

DEPARTMENT RESPONSE		
Corrective Action:		Date:
Administrator:		Date:
Safety Officer Concurrence:		Date:

DISTRIBUTION: Employee, Supervisor, Department and CSS

DIRECTION: Employee: Forward to Supervisor

* Printed copies of this document may be outdated. Refer to electronic posting for current version.